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UNITED STATES DEPARTMENT OF AGRICULTURE
Bureau of Agricultural Economics
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April 1944

RURAL HEALTH AND MEDICAL CARE

A Selected List of References

Compiled by Marion E. Wheeler, Librarian
Lincoln Branch
United States Department of Agriculture Library

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UNITED STATES DEPARTMENT OF AGRICULTURE
Bureau of Agricultural Economics
Office of General Statistics
Lincoln, Nebraska
April 1934

RURAL HEALTH AND MEDICAL CARE
A Selected List of References

Compiled by William E. Thomas, Assistant
Lincoln, Nebraska
United States Department of Agriculture

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PREFACE

This annotated list includes recent references relating to health conditions and medical services in rural areas.

The list was compiled for the use of postwar planning groups in the Great Plains Region. It is designed to direct these groups to the recent information on rural health by; (1) calling attention to developments in medical care services, (2) presenting the literature on plans and programs in operation at the present time, (3) revealing the rural health situation in the United States and, (4) listing sources from which current information may be obtained.

As there was interest in recent experiences, condition and developments, the majority of the titles included have been published since 1938. Titles published prior to 1938, however, will be found in all sections of the bibliography and particularly in the Rural Health Situation Section where it was thought desirable to include references which would show the health situation over a longer period of time. Several bibliographies have been included which may be consulted for earlier material.

The majority of the publications listed may be borrowed from the Lincoln Branch Library or from the USDA Library through the Branch.

BIBLIOGRAPHIES

Feldkamp, Cora L. Health for rural America. A selected list of references. compiled by Cora L. Feldkamp, O.E.S. Library, U. S. Department of Agriculture. 1 p. typewritten.

This list contains twelve titles most of which deal with rural health situation and facilities in various parts of the United States. All publication dates are 1936 or earlier.

Ludd, D. M. Bibliography of rural medicine. 38 p. Cooperstown, N. Y., Mary Imogene Bassett Hospital, 1938.

Milbank Memorial Fund. Program of the Division of Research, 1928-1940. 55 p., 1941.

The bibliography contains a number of references on rural health most of which appeared in the Quarterly Bulletin of the Fund. pp. 47 - 55.

National health survey; list of publications. Public Health Reports 57 (22): 834-841. May 29, 1942.

A list of publications resulting from the survey which was made in 1935-1936 arranged under the following subjects: General illness findings, Medical care, Hospital facilities, Out-patient department facilities, Public health agencies, Occupational morbidity and mortality, Chronic disease, Accidents, Impaired hearing, Other specific diagnosis groups, Illness and medical care in childhood, Unemployment and illness, Housing, Fertility, Family composition, Other population subjects, Miscellaneous.

National safety council. Education division. Rural safety bibliography.

3 p. (Safety education memo No. 27)

A list of publications for use in elementary and secondary schools.

Pritchard, E.G., Hirsh, Joseph, Prince, M. T. Select bibliography on the social aspects of public health and medical care in the United States. 47 p., processed. U. S. Public Health Service, 1940.

As stated in the Introduction the purpose of this list is "To provide a sort of compass for those who wish to explore the literature on the economic, social and psychological problems of public health and of medicine, on past and present attempts to solve these problems, and on the history of medicine and public health."

Rural health, with special reference to protection from contagious diseases.

4 p., typewritten January 18, 1943.

U.S. Dept. of labor. Library. The national health program and medical care in the United States: selected references compiled by Ruth Fine. 25 pp., processed. Washington, D. C., 1940.

Contents.-Bibliographies.-Recent surveys of medical care in the United States.-The National health survey, 1935-1936.-General discussion of need for better medical care.-The National health program-. The Inter-departmental Committee and the National Health Conference.-Discussion of the National Health Program.-The National health bill, 1939 (Wagner Bill) Legislative history of bill, Discussion of National health bill.-The National hospitals bill of 1940.

U.S. Dept. of labor. Library. The national health program and medical care in the United States: selected recent references, supplement, August 1941.

8 p., processed.

Many references on group health plans.

U. S. Library of congress. Group insurance: a bibliographical list of recent writings compiled by Anne L. Baden. 25 p., processed. Washington, D. C., Mch. 1935.

U. S. Library of congress. Medical care in the United States and foreign countries with special reference to socialization: selected list of recent writing compiled by Anne L. Baden. 45 p., processed. Washington, D. C., 1935.

There is also a twenty-six page supplement dated 1938.

American country life conference. Postwar planning for farm and rural life. A selected list of materials and digest of activities designed to furnish useful information to planners and discussants. Prepared for the Conference at Chicago, April 11, 12, 13, 1944, by a committee representative of American Library Association, Rural Educational Project of the University of Chicago, Division of Farm Population and Rural Welfare, U. S. Department of Agriculture. 33 p., processed. 1944.

A discussion of the public health situation and a description of the publications available for studying the problem will be found on pages 22-26.

[illegible]

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Best books on public health. Municipal reference library notes 28:81-90.
December 1942.
The list is annotated.

HEALTH EDUCATION

Anderson, Elin L. Health on the home front. 14 p. Nebraska ext. circ. 1023.
1942.

A pamphlet designed to facilitate discussion of war time health and medical needs. Presents certain phases of the problem in dialogue form.

Bauer, W. W. and Hull, T. G. Health education of the public; a practical manual of technic. 2nd. ed. rev. 315 p., illus. Philadelphia, W. B. Saunders Co., 1942.

In addition to bibliographies at the end of most of the chapters there is a chapter on Sources of material and one on The magazine article and books.

Turner, C. E. Personal and community health. Ed. 6, 652 p. St. Louis, Mosby, 1942. Ref. at end of each chapter except ch. 2.

Has chapters on nutrition, food control, water supply, waste disposal, the control of communicable diseases etc.

U. S. Office of education. Physical fitness through health education for the victory corps. 98 p., illus. Victory Corps Series Pam. No. 3. Washington, D. C. U. S. Govt. print. office, 1943.

This pamphlet "contains curriculum material for teachers and suggestions for administrative action required to implement a program of health education"-Foreword.

There are references at the end of each chapter.

Works, G. A. and Lesser, S. O. Rural American today; its schools and community life. 450 p., illus. Chicago, Ill., The University of Chicago Press, 1942.

Chapter IX is entitled "The Schools and and Rural Health." It presents facts about health and health agencies in rural America, and discusses the part the schools should play in a rural health program.

In the section "Authorities for the Facts" several sources of data on rural health are mentioned.

HEALTH PLANS AND PROGRAMS

American Dental Association. National Health Program Committee. Programs for dental health. 48 p. Chicago, 1941.

Describes four basic types of dental programs: service bureaus; credit and collection bureaus, pre-payment plans; group plans. The FSA dental program is outlined.

Best made on health: health, biological reference library, 1941-1942
The book is available.
1941.

HEALTH EDUCATION

Anderson, John L. Health on the home front. 1941.
A pamphlet designed to facilitate discussion of war-time health and medical needs. It contains certain phases of the problem in Illinois towns.

Barber, W. W. and Hall, T. G. Health education of the child: a practical manual of technique. 2nd ed. rev. 1942. Illinois. Philadelphia, W. B. Saunders Co., 1942.

In addition to bibliography at the end of each of the chapters there is a chapter on sources of material and one on the magazine article and book.

Barber, W. W. Personal and community health. 2nd ed. rev. 1942. Illinois. 1942. But, at end of each chapter, except the last, are chapters on nutrition, food control, water supply, waste disposal, the control of communicable diseases etc.

E. S. Office of education. Physical fitness through health education for the victory course. 2nd ed. rev. 1942. Victory Corps Series No. 1. Washington, D. C. U. S. Govt. Printing Office, 1942.
This pamphlet contains material essential for teachers and suggestions for administrative action required to implement a program of health education. There are references at the end of each chapter.

Smith, E. A. and Weaver, H. C. Rural American today: for schools and community. 1942. 1942. 111th. Chicago, Ill.: The University of Chicago Press, 1942.
The book is entitled "The Schools and Rural Health". It suggests to the school health and health agencies in rural America, and illustrates the part the schools should play in a rural health program.
In the section "Background for the Future" several sources of data on rural health are mentioned.

HEALTH PLANS AND PROGRAMS

American Dental Association. National Health Program Committee. Program for dental health. 2nd ed. Chicago, Ill.: American Dental Association, 1941.
Describes four basic types of dental programs: service, private, public and collection programs, group plans. The 1941 dental program is outlined.

Anderson, E. L. Nebraska organizes for health protection. In National Conference of Social Work. Proceedings 70:208-215. 1943.
The Nebraska rural medical program.

Anderson, E. L. Nebraska pioneers in rural medical care. Medical care 2(4):303-313. November 1942.
The Nebraska project on medical care and health of rural people carried on cooperatively by the Farm Foundation and the University of Nebraska. Emphasis was placed on an educational program to aid rural people to analyze their health and medical needs and to determine how to meet these needs with the assistance of their physicians, dentists, and health agencies.

Anderson, E. L. Nebraska's extension service on the health front. Journal of Home Economics. 35(3):137-41. March 1943.
Describes the project on the medical care and health of rural people carried on by the College of Agriculture of the University of Nebraska in cooperation with the Farm Foundation. Experiences in various sections of the state are described.

Bishop, R. G. A rural health program of the Department of Agriculture. 5 p., processed. Washington, D. C., U. S. Farm Security Administration, 1942.
(Reprinted from DENTAL HEALTH, November 1942, by permission of the National Dental Hygiene Association)
Health program in Hamilton County, Nebraska.

Bureau of cooperative medicine. New plans of medical service; examples of organized local plans of providing or paying for medical services in the United States. 72 p. New York, 1940.
Thirty plans operating in the United States are described.

Carter, Marvin. A pattern for rural health service. Farm and Ranch 62(3):1, 31. March 1943. 6 T31.
"Full medical service for every member" is the aim and purpose of the Cass County (Texas) Rural Health Service Association, one of six such organizations in the United States experimenting in furnishing full medical services to farm families.

Ellsworth, Von T. A health program for California farmers. Medical Care 1:33-38. January 1941.
The Farm Bureau Federation found that 50 percent of the medical needs of farm families are unfilled. A program of health centers and voluntary health insurance is recommended.

Extension workers lead in establishing health co-op. Ext. Service Review 13:121. August 1942.
Sand Hills cooperative health association.

Anderson, E. L. Nebraska organization for health improvement in Nebraska
Conference of Rural Health, Proceedings, 1935-1936, 1937.
The Nebraska rural medical program.

Anderson, E. L. Nebraska experience in rural medical care. Medical care 3(4):
300-315, November 1945.
The Nebraska project on medical care and health of rural people carried
on cooperatively by the Farm Foundation and the University of Nebraska.
Emphasis was placed on an educational program to aid rural people to
improve their health and medical needs and to determine how the needs could
be met with the assistance of their physicians, dentists, and health
agencies.

Anderson, E. L. Nebraska's extension committee on the health front. Journal of
Rural Economics, 35(3):137-41, March 1943.
Describes the project on the medical care and health of rural people
carried on by the College of Agriculture of the University of Nebraska
in cooperation with the Farm Foundation. Experiences in various sections
of the state are described.

Althrop, R. B. A rural health program of the Department of Agriculture, U. S.
Government, Washington, D. C., U. S. Farm Security Administration, 1942.
(Reprinted from RURAL HEALTH, November 1942, by permission of the National
Rural Hygiene Association)
Health program in Hamilton County, Nebraska.

Survey of cooperative medicine. New plans of medical service; examples of
organized local plans of providing or paying for medical services in the
United States. U. S. New York, 1940.
Thirty plans operating in the United States are described.

Conley, Mary. A pattern for rural health service. Farm and Ranch 51(4):11,
31, March 1937, 6 1937.
"Rural medical service for every member" is the aim and purpose of the Orem
County (Utah) Rural Health Service Association, one of six such ser-
vices in the United States experimenting in furnishing this medical
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Kilpatrick, Van E. A health program for California farmers. Medical care
1:35-37, January 1943.
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health insurance is recommended.

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151, January 1937.
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Farmers hospital association plan launched by group. Producer-Consumer 5(11):8. June 1940.

Describes the plans of the cooperative organizations in Hale County, Texas, for a Hospital Association which has "for its purposes the extension of hospital and surgical care to the members of all-cooperative movements who desire to avail themselves of this service."

Jacobson, G. W. The story of one health cooperative in the making. Consumer Cooperation 29:58-62. April 1943.
An account of the Group Health Mutual of Minnesota.

Klem, Margaret C. Prepayment medical care organizations. . . 252 p., processed Bureau Memorandum No. 55. Washington, D. C., Federal Security Agency, Social Security Board, Bureau of Research and Statistics, November 1943.
A digest of the general characteristics of prepayment medical service plans currently in operation. A number of rural health group plans are included, but plans administered by the Farm Security Administration are excluded.

Kramer, L.R. Dental "Insurance Plans" for Federal assistance cases in Kansas. Medical Care 3(4):327-330. November 1943.
A report on the Butler County plan, with statistics.

Lott, G. M. Mental hygiene services in rural areas. Public Health Reports 57(31):1115-1126. July 31, 1942.
"This discussion refers to the experience of a child guidance or mental hygiene unit operating as a division of the Suffolk, New York, Department of Health".

Mackenzie, G. M. Collectivism in a rural hospital. Medical Care 2(2):127-133. April 1942
A description of the organization, administration and activities of the Mary Imogene Bassett Hospital situated in a New York State village and serving a rural population.

Mangus, A. R. Voluntary health insurance plans and their application in rural areas. 35 p., processed. Columbus, Ohio, August 16, 1943.
Published by Department of Rural Economics and Rural Sociology, Ohio State University and Ohio Agricultural Experiment Station.
Gives a brief description of six types of voluntary health insurance plans with concrete illustrations of plans in actual operation.

Manson, M. S. Rural clinics in Colorado improve children's health. Nation's Health 8:90-92. February 15, 1926.

A model cooperative county dental program. Mountain Life and Work 18(1):23-24. Spring 1942.
Outlines a plan for meeting the dental needs of under-privileged children. The county is Hawkins in Tennessee.

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- Mullen, Eileen. No doctor shortage here. Country Gentlemen 113(1): 16,68.
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Sub-title.
- Mustard, H. S. Cross-section of rural health progress. 230 p. New York, The Commonwealth Fund, 1940.
Report of the Commonwealth Fund child health demonstration in Rutherford County Tennessee 1924-1928.
- Rorem, C. Rufus. Community hospital and medical plans. 16 p. Chicago, American Hospital Association, 1944.
A description of the Blue Cross Plan for hospital protection.
- Self-started rural hospitals. Medical Care 1(1):82-83 January 1941.
Editorial comment on four rural hospitals in Georgia. Reference is made to a fuller account in the Journal of the Medical Association of Georgia, July 1940.
- Shadid, Michael A. A doctor for the people; the autobiography of the founder of America's first cooperative hospital. New York, The Vanguard Press, 1939.
This is the story of the co-operative hospital at Elk City in western Oklahoma where two thousand families pay \$25 a year and receive complete medical, surgical, and dental care for each member of the family.
- Streeter, C. P. If farmers want health. Farm Journal and Farmer's Wife 67 (2):64-65. February 1943.
The U. S. Department of Agriculture's experimental health programs with particular reference to Hamilton County, Nebraska.
- Streeter, C. P. Sand Hills medicine. Farm Journal and Farmer's Wife 67(1): 38-39, January 1943.
The story of the Sand Hill and medical program.
- U. S. Dept. of agriculture. Farmers in a changing world. The yearbook of agriculture 1940. Washington, D. C., U. S. Govt. Print off., 1940
Contains several references to the rural health program of the Department especially the work of the FSA. See references under "health" and "medical" in the index.
- U. S. Dept. of agriculture. Interbureau coordinating committee on post-war programs. Experimental rural health program. 19 p., processed. March 1942.
The history, scope and character of the U.S. Department of Agriculture health program.

Page 100
The first part of the book is devoted to a general introduction to the subject of the history of the world.

The second part of the book is devoted to a detailed account of the history of the world from the beginning of the world to the present time.

The third part of the book is devoted to a detailed account of the history of the world from the present time to the future.

The fourth part of the book is devoted to a detailed account of the history of the world from the future to the end of the world.

The fifth part of the book is devoted to a detailed account of the history of the world from the end of the world to the beginning of the world.

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- U. S. Dept. of agriculture. Interbureau coordinating committee on post-war programs. Experimental rural health program. Report on activities.... Washington, D.C. Bi-monthly processed. L90 C2 In8Per
Bi-monthly statements dealing with the organization and activities of the six rural health associations sponsored by the Interbureau Coordinating Committee on Post-War Programs. These are: Cass County Rural Health Service, Hamilton County, Texas; Hamilton County Medical Aid Association, Nebraska; Nevada County Rural Health Services Association Inc., Arkansas; Newton County Rural Health Services Association, Inc., Mississippi; Wheeler County Rural Health Service, Texas; and Walton County Agricultural Health Association, Georgia.
- Walker, W. Frank, and Randolph, Carolina R. Influence of a public health program on a rural community: Fifteen years in Rutherford County, Tennessee, 1924-1938. N. Y. The commonwealth Fund, 1940.
- Warburton, A. A., and Kiessling, A. H. Organizing a health program in a rural school. A parent-teacher association experiment. U. S. Children's Bur. Child 8:26-30. August 1943.
"Note.-The program...was organized in the Franklin Sherman School, a seven-grade school having approximately 300 pupils aged 6 to 14 years. The school is located in the village of McLean, Va., but most of the children live in adjacent suburban and rural areas..."
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- Weaver, Anna Dee Pennies Pay Their Hospital Bills The Blue Cross Way Nebraska Farmer, 86(1):1-14. January 1, 1944
The Blue Cross plan in a rural community.
- Williams, J. W. Integration of medical care into the health program in rural Missouri. American Journal of Public Health 33:499-504. May 1943.
Description of county health units in Missouri, and account of a short-time study on medical care in Greene, Jasper and Laclede counties. Favors a combination of medical care and public health service to supply both curative medical care and preventive service.
- Winslow, C. E. A. Health on the farm and in the village. 281 p. New York The Macmillan Company, 1931.
"A review and evaluation of the Cattaraugus County (New York) health demonstration with special reference to its lessons for other rural areas."

Farm Security Administration Program

- Goldmann, Franz. Medical care for farmers. Med. Care 3(1):19-35. Feb. 1943.
Review of Farm Security Administration medical care program. In June 1936, "eight counties in three states had plans in operation. Six years later, 1,074 counties in 40 states were served. Between June 30, 1936 and June 30, 1942 the number of families enrolled increased from less than 1,000 to 117,460, or 613-854 persons."

- Goldner, William. The costs of medical care in the Agricultural Workers Health and Medical Association. 104 p., processed. San Francisco, Agricultural Workers Health and Medical Association, 1941.
This report includes a section on the incidence of illness in the AWHMA; presents data to test the adequacy of the Association's finding control system; makes a comparison of unit costs in relation to clinic and referral programs; presents data for comparison with other medic-economic studies.
- Harding, T. Swann. Farmers and miners and group-health plans. Amer. Scholar 9 (3):305-315. Summer 1940.
The writer describes health and medical conditions in mining and rural districts, and discusses the group health projects started by the U. S. Farm Security Administration.
- Hellman, Richard. The farmers try group medicine. Harper's Mag. 182(1087):72-80. December 1940.
Describes the group health plans and their development in rural areas under the Farm Security Administration.
"To-day in 634 counties in 32 different states group health plans organized by the FSA are in operation."
- Medical care for farm workers in California and Arizona. Monthly Labor Review 55:957-9. November 1942.
Brief review of the work of the Agricultural Workers' Health and Medical Association from its establishment in 1938 to 1941.
- Mott, F. D. Farm security administration care efforts in 1944. Speech by Dr. F. D. Mott, Chief Medical Officer, Farm Security Administration at Regional Directors' Conference, French Lick, Indiana. July 14-21, 1943. 6 p. processed. July 1943.
Gives the background for the rural health problem, and states briefly what has been done and what remains to be done. For use of USDA employees only.
- Mott, F. D. Helping farm families keep fit. 3 p. processed. February 9, 1944. Broadcast by Dr. Frederick D. Mott, Chief Medical Officer, FSA and Wallace Kadderly, Chief of the Radio Service.
A recent statement on the FSA medical care program.
- Ratcliff, J. D. Health for the backwoods. New Republic 106(23):789;791. June 8, 1942.
Farm Security Administration's health aid plan for the poorest rural people, as it operates in Prince Edward County, Va.
- Schaupp, K. L. Medical care experience of the Farm Security Administration in California. In National Conference of Social Work. Proceedings 68:494-501. Describes the organization and work of the Agricultural Workers Health and Medical Association, in improving the Health conditions among migratory agricultural laborers. (1941)

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- U. S. Bureau of labor statistics. Medical care for low-income farm families. U.S. Bur. Labor. Statis. Monthly Labor Rev. 48:592-595. March 1939. Explains the Farm Security Administration's medical care programs for its rehabilitation clients.
- U. S. Farm security administration. Group medical care for farmers. FSA-Pub. 75, 14 p. Washington, D. C., U. S. Govt. Print. off., 1941. Explanation of the medical service programs developed in aid to the clients of the FSA.
- U. S. Farm security administration. The medical care program for farm security administration borrowers. 12 p., processed. Washington, D.C., Rev. ed. May 15, 1941. Describes a typical medical care program.
- U. S. Farm security administration. Report on activities of the Farm security administration medical care program, through county, district and State units. Washington, D. C. January - March 1943 latest received. Quarterly
- U. S. Farm security administration.. Office of the chief medical officer. Annual report (fiscal years 1937-1941. 4 Nos., processed. Washington, D. C., 1939-1941)
 Reports on the medical care programs of the Farm Security Administration, with facts and statistics on their operation.
 The 1937/1938 report is entitled "Summary of the Annual Report".
 "There was no complete report for the fiscal year 1941-42, but significant tables related to the progress of the program for that year were published... The figures for the past fiscal year, 1942-43, are now being processed, but will not be available for some time" letter from F. D. Mott, M. D., Chief Medical Officer, FSA to U. S. Dept. of Agriculture Library, Lincoln Branch. February 25, 1944.
- U. S. Farm Security administration. Office of the chief medical officer. Progress report for 1939 79 p., Processed. Washington, D. C., 1943. Report on the medical service programs, developed for the benefit of the rural rehabilitation and other clients of the Farm Security Administration. The only Progress report published. Furnishes "historical background and a description of the growth of the medical care program from the date of inception."- Letter from F. D. Mott, M. D. Chief Medical Officer, FSA to U.S.Dept. of Agriculture Library, Lincoln Branch. February 25, 1944.
- U. S. Farm Security administration. Region IX. Health for western farm workers. 9 p., processed. San Francisco, Rev. July 1942. An account of the history, purpose, and work of the Agricultural Workers' Health and Medical Association.
- U.S. House. Select committee to investigate the activities of the Farm Security Administration. Farm security administration. Hearings... pursuant to H. Res. 119... 3 vols. Washington, D. C., U. S. Govt.Print.Off., 1944. Part 3 has a section on the medical program of the FSA. pp. 1006-1010.

Wade, Mathilda Ann. Community nursing - FSA style. Pub. Health Nurse 34(2): 82-88. February 1942.

Community nursing services have been set up and are now in operation on 45 of the 148 FSA projects scattered throughout the United States.

"The medical care plan at Ashwood Plantation is similar to others being established by the Farm Security Administration in cooperation with the organized medical profession. In 900 counties of the 37 states, these rural health plans are providing essential medical and hospital care for more than 100,000 farm families at a price which they can afford."

Williams, R. C. The medical program for Farm security administration borrowers. Law and contemp. Prob. 6:583-594. Autumn 1939.

The FSA health program in North and South Dakota is described.

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An explanation of the organization and operation of the various medical care plans developed by the FSA for the benefit of its rehabilitation clients and other low-income farm families.

(Also a processed digest of this paper 1.95 M46Me)

U. S. Congress. Senate. Committee on education and labor. Investigation of manpower resources, hearings...77th Cong., 2d sess., on S. Res. 291. Pt. 2, pp. 569-877. Washington, D. C., U.S.Govt.Print, Off., 1943.

Testimony of Dr. F. D. Mott, chief medical officer of the U. S. Farm Security Administration, with regard to the shortage of rural physicians and medical services, and the medical work of the Farm Security Administration, pp. 774-789.

MEDICAL SERVICES

General

American medical association. Bureau of medical economics. MEDICAL SERVICE PLANS; a report . . . 72 p. Chicago. 1943. Chapters on Growth of medical organizations; Care of the indigent; Farm security administration, medical care plans; Experience with prepayment plans.

American medical association. Bureau of medical economics. Rural medical service. 80 p., bibliog. Chicago, 1937.

Anderson, Elin L. Do we want health? 32 p., illus. Nebr.Agr.Ext.Serv.Circ. no. 1021. September 1940.

Contents.-The problem as Nebraskans see it.-How healthy are we?.-Preventable diseases.-Community responsibility for the public's health.-Medical services.-Paying for sickness.-Investing in health.-What can we do?

There is also a supplement entitled Family Health Plan. Supplement 26, 1942.

Colcord, J. C. Your community; its provision for health, education, safety, and welfare. 249 p. New York, Russell Sage Foundation, 1939.

A guide to the type of information to be assembled and studied in attacking the problem of supplying community lacks and improving existing services.

Chapter 8 "Provisions for health care"; chapter 9 "Distribution of health care"; chapter 10 "Provisions for the handicapped" should be of interest to those studying rural health problems.

Committee on the costs of medical care. Medical care for the American people. The final report of The Committee on the costs of medical care, adopted, October 31, 1932. 213 p. Chicago, The University of Chicago Press, 1932.

Some discussion of rural medical costs. See subject "rural areas" in the index.

Cuber, J. F. City and country services utilized by farm families. Sociology and Social Research 23 (2):157-161. November-December 1938.

Two hundred farm families in southwestern Michigan were studied. The local village, the author concluded, exerts almost as complete dominance in the case of medical care as it does of banking.

Davis, M. M. America organizes medicine. 335 p. New York, Harper & Brothers Publishers, 1941.

References to rural health are listed in the index under "Rural areas". List of general and specific references pp. 302-320.

Desirable minimum functions and organization principles for health activities: An official declaration, Adopted October 9, 1940. American Public Health Association. Year Book, 1940-1941. American Journal of Public Health 31(3):43-50 (supplement) March 1941.

Falk, I. S. Security against sickness: a study of health insurance. 423 p. New York, Doubleday, Doran and Company, Inc., 1936.

Discusses the need for group payment of sickness costs in this country, and reviews the experience of foreign countries with health insurance.

Foster, W. T. Doctors, dollars and disease. 32 p. Public affairs pamphlets no. 10 rev. New York, Public affairs committee, inc., 1939.

Discusses such questions as can we afford health? How can we maintain good medical care? How far shall we use insurance? How far shall we use taxation?

Helm, F. P. Measures for rural health. In Kansas state board of agriculture. Biennial report 32:110-114. Topeka, Kansas, 1941.

Communicable disease control, public health nursing, accident prevention are some of the programs discussed.

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International labour conferences. Twenty-sixth session. Social security; principles, and problems arising out of the war. 115 p. Part 1: Principles. Montreal, International Labour Office, 1944.

Section II. Medical care the following subjects are discussed: Nature and form of medical care program; Persons covered; The provision of care and its co-ordination with general health services; Quality of service; Financing of medical care service; the administration of medical care services; Proposed recommendation concerning medical care.

Joint Committee of the Twentieth Century Fund and The Good Will Fund. Pamphlet series on group health plans. 4 v. New York, 1941-1942.

The pamphlets in this series are "designed to be of practical service to the physicians and laymen who are concerned with the organization and administration of health insurance plans."

The following titles are included in the series: Prepayment plans for medical care. by Franz Goldmann. 60 p. 1941.

Organization and administration of group medical practice, by Dean A. Clark and Katherine G. Clark 109 p. 1941

Business procedures, by Perry R. Taylor, 109 p. 1941

How to organize group health plans, by M. W. Brown, K.G. Clark, P. R. Taylor. 72 p. 1942.

Maslow, H. Intelligent Consumer's Guide to Hospital and Medical Plans. 32 p., bibliography. League for industrial democracy. 1942.

Medical administration service, inc. A blueprint; THE V PLAN. 24 p. 1943.

Outlines five procedures for putting the V Plan ("voluntary" hospital) into effect as follows: 1. application of the spread-risk, share-cost system to the payment of health and sickness expense; 2. practical program to lessen the incidence and severity of all illness and to maintain health; 3. use of group practice; 4. use of non-medical personnel to do work that does not have to be done by a physician; 5. educate public to ask for none but essential medical services and to share administrative responsibilities.

Medical administration service. A SOLUTION: COORDINATE MEDICAL MANPOWER. 15 p., New York. 1943.

Points out "the need for immediate study of existing methods for distribution of health services and medical care."

Post-War health planning. The American Forum of the Air 5(38). September 21, 1943.

Statements on post-war health plans by Mr. Henry J. Kaiser, Dr. Morris Fishbein, Dr. Ernst P. Boas, Dr. Kingsley Roberts, Dr. Louis H. Bauer, and Mr. Robert J. Watt.

Progress report of the (Nebraska) State Health Planning Committee, September 1941 to February 1942, to Second State Conference on the Medical Care and Health of Rural People. Nebr. Home Econ. Sect. of Organized Agr. Ann. Meeting Rpt., 37th, 1942. In Nebr. State Bd. Agr. Rpt. 1942; 320-330.

Tereshentenko, V. J. The problem of cooperative medicine. 78 p., W.P.A. of New York City, 1940

Explains the concepts of cooperative medicine, "gives basic data on Cooperative Health Associations in the United States and abroad, and analyzes views for and against Cooperative Medicine."

U. S. Interdepartmental committee to coordinate health and welfare activities. National health conference July 18, 19, 20, 1938 75 p., processed. Washington, D. C.,
Contains the recommendations of the conferences.

U.S. Interdepartmental committee to coordinate health and welfare activities. Proceedings of the National Health Conference, July 18, 19, 20, 1938. Washington, D. C. 163 p. Washington, U.S.Govt. print. off., 1938

The rural health problem was stated by Ben W. Kilgore, Chairman, Committee on Medical Care, American Farm Bureau Federation and Mrs. H. W. Shart, President of the Association Women of the American Farm Bureau Federation. Resolutions of the American Farm Bureau Federation are included. pp. 16-19.

U. S. National resources planning board. National resources development. Report for 1943. Part I. Post-war plan and program. 81 p. Washington, D. C., U. S. Govt. Print. off., 1943.
Outlines a broad program to provide equal access to health to all. Summarizes present health conditions in the United States. pp. 60-67.

Walker, W.F. and others. The costs of rural public health service. American Journal of Public Health 32(7):681-689. July 1942.

Information on the cost of public health services in typical rural areas in Mississippi and Tennessee. Twelve statistical tables are included noting cost of health department service, total expenditures and percentage by service and county, medical cost, nursing cost, sanitation cost, cost per inspection and medical and nursing cost per clinic visit.

Warbasse, James Peter. Cooperative medicine; the cooperative organization of health protection. 24 p. New York, The Cooperative League, 1936.
Arguments in favor of the cooperative health plans.

Facilities

Collins, S. D. Variation in hospitalization with size of city, family income, and other environmental factors. Public Health Reports 57(44):1635-1659. October 30, 1942.

Report on hospitalization in rural and urban areas based on records of 9,000 families in 18 states visited periodically for 12 months 1928-31.

Cummings, H. S. Rural health facilities. In Rural America 14(2):27-28. Febr. '36
"it is now believed that the answer to the rural health problem is the full-time county or district health unit." Lists the essentials of a full-time health unit.

1. The first part of the paper is devoted to a general discussion of the problem.

2. In the second part, we shall consider the case of a single particle.

3. The third part is devoted to the case of a system of particles.

4. In the fourth part, we shall discuss the results of our calculations.

5. The fifth part is devoted to a discussion of the physical meaning of the results.

6. In the sixth part, we shall consider the case of a system of particles.

7. The seventh part is devoted to a discussion of the physical meaning of the results.

8. In the eighth part, we shall consider the case of a system of particles.

9. The ninth part is devoted to a discussion of the physical meaning of the results.

Demars, Vernon. Farm labor - after shelter comes health - FSA's rural health program in California as an example of rural needs translated into architecture. Pencil Points 23:32-41. December 1942.

A series of photographs and plans of FSA clinics, mobile clinics, rural hospitals, and medical centers. Captions give some information on construction costs and materials.

Halbert, Blanche. Hospitals for rural communities. 41 p. illus. U.S.D.A. Farmer's Bulletin no. 1792. November 1937.

Information on hospital needs, size, cost, financing, and plans, based on the experiences of many localities.

Illinois. Legislative council. Research department. County health departments. 25 p., processed. Publication 57. Springfield, Ill., February 1943.

The report deals with the organization of local public health administration

Julius Rosenwald fund. Hospital facilities in rural areas. Rosenwald, 1935.

Mott, Frederick D. Post-war rural hospital planning. 8 p., processed. Washington, D. C., U. S. Farm Security Administration, 1943. 1.95 M46Mo

A statement of post-war health needs in rural areas with particular reference to hospital facilities.

Mountin, J. W. and others. Hospital facilities in the United States. I. Selected characteristics of hospital development, 1928-1936. Public Health Bulletin no. 243. September 1938.

Roberts, Kingsley. Toward better rural health facilities. Rural America 18(2):8-9. February 1940.

Advocates group health program and suggests as a first step the building up of a diagnostic center.

Streeter, C. P. Reorganizing rural health facilities. In National country life conference. Proceedings of the eighteenth... conference 18:47-59, 1935.

The author spent eight years studying rural health experiments and surveying the health needs. The essence of that investigation is reported in this paper. Agr. 630.6 N21n

Foreign Experience

American academy of political and social science. Annals, v.208, pp. 1-252. March 1940.

The title of this issue is: Mexico Today; edited by Arthur P. Whitaker, There is an article by Miguel E. Bustamante entitled "Public health and medical care" pp. 153-161.

Discusses health situation in rural Mexico and the organization and services established to cope with the problem.

Canada. Dept. of labour. Health insurance in Saskatchewan. Survey of rural and urban medical and hospitalization plans. Canada. Dept. of Labour, Labour Gazette 41(6):639-641. June 1941.

Examples of the various types of plans are given the methods of financing and the costs for individual and family are stated.

Davison, R. O. Rural medical care in Saskatchewan. Medical Care 1(2):124-134 April 1941.

Services, organization and costs of the "municipal doctor" and hospital plan.

Hydrick, J. L. Intensive rural hygiene work in the Netherlands East Indies. 83 p. Booklets of the Netherlands Information Bureau no. 7. New York The Netherlands Information Bureau, November 1942.

Stresses the importance of health education in schools and communities.

League of Nations. European conference on rural life 1939. General survey of medico-social policy in rural areas. Prepared under the auspices of the Health Committee. 46 p. Geneva, March 1939.

Partial contents.- Curative medicine.-Preventive medicine.-Rural planning.-Education of rural population in health matters.

League of Nations. European conference on rural life. Sickness insurance and rural medical assistance. Prepared by the International Labor Office. 33 p. Geneva, May 1939.

"The present report is intended to bring out the nature of the contribution which sickness insurance can make to the establishment of a sound and effective rural medico-social policy." - Introduction

Maurer, Rose. Soviet health care in peace and war. 48 p. N. Y. American Russian Institute. 1943.

An illustrated pamphlet describing the diversified health programs of the Soviet Government. Rural medical services are discussed in the first part of the publication.

Medical administration service, inc. Medical planning research. Interim general report... 32 p. N. Y., Medical Administration Service, Inc. 1943.

"A distinguished report on a proposed reorganization of medical practice in Great Britain." - Subtitle

Methods of paying for and administering the plan are outlined.

Planning of medical care in the British commonwealth of nations. Inter-American committee on social security. Provisional bulletin no. 4: 10-35 October 1943.

Describes the plans for extended medical care services which are being developed in Great Britain, Australia, Canada, New Zealand and South Africa.

Legislation

Anderson, Elin L. L.B. 295 gives the green light to local health departments. Nebr. Agr. Ext. Serv. Circ. no. 1024 (1943)

Explains the law which enables counties and groups of counties to establish and maintain local public health departments for the health protection of their citizens, the services that it enables a county to establish and maintain, and suggests the steps which citizens in any community may take to obtain these services.

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Davis, M. M. and Erlich, Rose. Four national health bills compared. Medical care 3(4):331-339. November 1943.

An analysis of the Wagner-Murray bill of 1943 (S.1161); the Wagner bill of February 1939 (S.1620) the American Association for Social Security health insurance bill, prepared in 1935 and revised in 1940; and the Canadian Health Act of 1943.

Murray, James E. Expansion of social security system. Congressional Record 90(27):A735-737. February 11, 1944.

Senator Murray discusses the opposition which has developed to the medical provisions of the Wagner-Murray-Dingell bill.

Murray, James E. Expansion of the social security system. Congressional Record 90(3):86. January 12, 1944.

A summary of the provisions of the Wagner-Murray bill including the medical care provisions.

U. S. Congress. Senate. Committee on commerce. Federal cooperation with states in promotion of general health of rural population of the United States and welfare and hygiene of mothers and children. Hearings...seventy-second Congress, first session, on S.572...Washington, D. C. U. S. Govt. print.off., 1932.

U. S. Congress. Senate. Committee on education and labor. To establish a national health program...Hearings ... 76th Congress, first session on S.1620. 3 pts. Washington, D. C. U.S. Govt. print.off., 1939,

U. S. Social security board. Brief summary of principal amendments to the Social Security Act incorporated in the Wagner-Murray-Dingell Bill (S.1161 and H.R. 2861 78th Congress)

Paragraph five describes the medical and hospitalization insurance provisions.

Wagner, R. F. Federal health insurance. Congressional Record 89(166):A4997-4999. November 3, 1943.

A series of articles by Senator Wagner explaining the health insurance provisions of the Wagner-Murray-Dingell bills together with other comment and correspondence.

RURAL HEALTH SITUATION

Almack, R. B. The rural health facilities of Lewis county, Missouri. Mo. Agr. Exp. Sta. Res. Bul. 365., 42p. May 1943.

Conference on rural medicine. Proceedings... 268 p. Springfield, Ill., Charles C. Thomas, 1939.

"The papers in Part 4, "Economics of Rural Medicine" (p.173-244), discuss the adequacy of medical services in rural areas, the position of the country doctor and the attitude of people in rural communities toward some form of government or local subsidy."

1. The first part of the report deals with the general situation of the country and the progress of the work during the year.

2. The second part of the report deals with the results of the work done during the year. It is divided into two main sections: the first section deals with the results of the work done in the field, and the second section deals with the results of the work done in the laboratory.

3. The third part of the report deals with the conclusions drawn from the results of the work. It is divided into two main sections: the first section deals with the conclusions drawn from the results of the work done in the field, and the second section deals with the conclusions drawn from the results of the work done in the laboratory.

CONCLUSIONS

4. The fourth part of the report deals with the recommendations made by the committee. It is divided into two main sections: the first section deals with the recommendations made by the committee in regard to the work done in the field, and the second section deals with the recommendations made by the committee in regard to the work done in the laboratory.

Dorn, H. F. The relative amount of ill-health in rural and urban communities. Public Health Reports 53(28):1181-1195. July 15, 1938

"Regardless of the way in which ill-health is measured, rural residents possess definite advantages over urban residents...rural residents still have definitely lower rates than urban residents..."

Dorn, H. F. Rural health and public health programs. Rural Sociol. 7(1): 22-32. March 1942.

"Although in the past, death rates of urban residents have been almost universally higher than the rates of rural residents, the superior health and medical services and facilities in urban areas have been gradually reducing this differential. In 1900 urban death rate was 50 percent higher than the rural rate; in 1939 the urban death rate was about 10 to 12 percent higher after allowance is made for incomplete registration of deaths of rural residents. Infant and maternal mortality rates are now higher in rural areas. Sickness rates are approximately the same in rural and urban areas, but the relative number of physicians and hospitals is much greater in cities than in the country. The traditional pattern of public health activities with its emphasis on community sanitation and the control of communicable diseases makes almost no provision for direct medical care. The Farm Security Administration has initiated medical care plans for its clients but these, at best, can serve only one or two percent of the rural population." Abstract.

Extent of rural health service in the United States, December 31, 1932 to December 31, 1936. Public Health Reports 52(47):1639-1666. November 19, 1937.

Recognizes the health unit as the minimum standard capable of furnishing a complete health service to local communities. The personnel of a unit to consist of a medical director, public health nurse, sanitary engineer, and an office clerk.

Counties having full-time health officers are listed.

This is the last of a series of articles on the extent of rural health service. Others were printed in the following Public Health Reports.

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| 1935 - August 14, 1936 | 1928 - April 13, 1928 |
| 1934 - Nov. 1, 1935 | 1927 - April 29, 1927 |
| 1933 - Dec. 7, 1934 | 1926 - April 29, 1927 |
| 1932 - Oct. 6, 1933 | 1925 - May 7, 1926 |
| 1931 - Dec. 16, 1932 | 1924 - May 8, 1925 |
| 1930 - Sept. 11, 1931 | 1923 - May 16, 1924 |
| 1929 - May 9, 1930 | 1922 - April 27, 1923 |

Garnett, W. E. The Virginia rural health and medical case study; a progress report and related questions. Va. Agr. Expt. Sta. Rural Sociol. Mimeog. Rpt. 27, 9 p. 1943.

This discussion of the rural health and medical care situation in Virginia is preceded by a summary of the advance in medical science and techniques, and a statement on the changes in the attitudes of various groups toward the problem of medical care.

Goddard, J. C. Medical and nursing services for the maternal cases of the national health survey...63 p. Washington, D. C., U. S. Govt. print. off., 1941

There is information on medical services and nursing services for women in selected rural areas. Four counties in Michigan, three in Missouri, and sixteen in Georgia were included in the survey. pp. 33-35.

Hill, Randall C. and Jehlik, Paul. Survey of rural health facilities and services in Kansas. Kansas Agr. Exp. Sta. cooperation with the U. S. Bureau of Agricultural economics.

This report is in preparation.

A state-wide inventory of health facilities and services available to rural areas was made with data on medical services, nurses, clinics, dentists, and hospitals. Some information was obtained on the pattern of health services particularly in terms of hospital areas. The prevailing health situation was analyzed as to incidence of disease and mortality rates for specific illnesses.

Hollingsworth, Helen and other. Family expenditures for medical care; five regions. 241 p. U. S. Dept. of agriculture. Miscellaneous publication no 402. Washington, D. C., U.S.Govt.print.off., 1941

Presents a description of the medical care expenditures of families at different income levels in the small cities, villages, and farm counties surveyed by the Bureau of Home Economics as a part of its consumer purchases study.

Kansas. State Land Use Planning Commission. A unified farm program. Impacts of war and defense. 81 p., processed. June 1941

The section on health has a general statement on conditions followed by a discussion of housing, recreation, preventive medicine, and food in relation to health. Recommendations are included. pp. 37-53.

Kratz, F. W. The present status of full-time local health organization. Public Health Reports 57(6): 194-196. February 6, 1942.

According to this report the percentages of counties provided with service under local-district and state-district forms of organization have increased in recent years.

A United States map shows 1. unorganized counties 2. full-time state district units 3. full-time single county units.

Kratz, F. W. Status of full-time local health organizations at the end of the fiscal year 1941-1942. Public Health Reports 58(9):345-351. February 26, 1943.

Reports that "full-time service was extended to 160 additional counties, bringing the total number of counties with such service on June 30, 1942 to 1,828 in the continental United States."

1. The first part of the paper discusses the importance of maintaining accurate records of all transactions. It emphasizes that proper record-keeping is essential for the success of any business or organization. The author argues that without reliable data, decision-making becomes speculative and risky.

2. In the second section, the author explores various methods for collecting and analyzing data. He compares traditional manual methods with modern automated systems, highlighting the advantages of technology in terms of speed and accuracy. The text also touches upon the challenges of data integration from multiple sources.

3. The third part of the document focuses on the application of statistical techniques to business data. The author provides a brief overview of descriptive statistics, including measures of central tendency and dispersion. He then discusses more advanced topics like regression analysis, which is used to identify relationships between different variables.

4. The final section of the paper addresses the ethical considerations surrounding data collection and analysis. The author stresses the importance of transparency and consent when gathering personal information. He also discusses the potential for data misuse and the need for robust security measures to protect sensitive information.

Kumlien, W. F. Basic trends of social change in South Dakota. V. Public health facilities. 30 p. So. Dakota., Agr. Exp. Sta. Bul 334. March 1940.

"It is the purpose of this study to graphically portray South Dakota's place in the health picture of the nation as well as to show the differences between different parts of the state in the matter of health conditions, health practices and health facilities". - Introduction.

Kumlien, W. F. The rural health situation in South Dakota. 59 p. South Dakota Agr. Exp. Sta. Bul. 258. April 1931.

Contents.-Part I. The new health era as related to rural life in South Dakota.-Part II. General facts about health agencies in South Dakota.-Part III. Health conditions in Brookings county.

Lively, C. E. and Almack, R. B. Some rural social agencies in Missouri; their nature and extent. 58 p. Mo. Agr. Expt. Sta. Res. Bul. 307. 1939.

Section IV deals with health agencies including state health department, physicians, hospitals, dentists. Statistics are given by counties.

Lively, C. E., and Lionberger, Herbert F. The physical status and health of Farm security clients in southeast Missouri, Prelim. Rpts. 1-3, processed. Columbia, Mo., Univ. of Missouri, 1942.

Rpt. no. 1: Results of blood tests for hemoglobin, by C. E. Lively. 9 pp. April 1942.

Rpt. no. 2: The physical defects of adult males. 12 pp. July 1942.

Rpt. no. 3: The physical defects of adult females. 18 pp. July 1942.

A cooperative study by the Missouri Agricultural Experiment Station, U. S. Farm Security Administration, Region III; Missouri State Medical Association, Missouri State Dental Association, Missouri Social Security Commission, and Group Hospital Service, inc.

Martin, W. P. Health for farm families. Kansas State College of Agriculture Bulletin 54. 52 p. Manhattan, November 1939.

Maslow, Harold. The characteristics and mobility of rural physicians; a study of six Wisconsin counties. Rural Sociology 3:267-78. September 1938.

Meier, Iola, and Lively, C. E. Family health practices in Dallas County, Mo. Mo. Agr. Expt. Sta. Res. Bul. 369, 32 p. 1943.

The second of a series of bulletins on the general subject of rural illness and medical care in Missouri. Illness rates and the cost of medical care in Dallas County will be treated in later publications.

Messner, C. T. and others. Dental survey of school children, ages 6-14 years made in 1933-34 in 26 states. Public Health Bulletin 226:1-248. 1936.

Nebraska, Colorado and North and South Dakota included in the survey. Statistics are given for selected counties.

1. The first part of the document discusses the importance of maintaining accurate records of all transactions. It emphasizes that proper record-keeping is essential for the transparency and accountability of the organization. This section also outlines the various methods used to collect and analyze data, ensuring that the information is reliable and up-to-date.

2. The second part of the document focuses on the financial aspects of the organization. It provides a detailed overview of the budget, including the projected income and expenses for the upcoming year. This section also discusses the various financial risks and the strategies implemented to mitigate them, ensuring the financial stability of the organization.

3. The third part of the document addresses the operational aspects of the organization. It describes the various processes and procedures that are in place to ensure the efficient and effective delivery of services. This section also discusses the various challenges faced by the organization and the strategies implemented to overcome them, ensuring the smooth operation of the organization.

4. The fourth part of the document discusses the human resources of the organization. It provides a detailed overview of the current staff, including their qualifications and experience. This section also discusses the various strategies implemented to attract and retain top talent, ensuring the organization has the best people to deliver its services.

5. The fifth part of the document discusses the marketing and public relations of the organization. It provides a detailed overview of the various marketing campaigns and public relations activities that have been implemented. This section also discusses the various strategies implemented to increase the organization's visibility and reach, ensuring it is well-known to its target audience.

6. The sixth part of the document discusses the legal and regulatory aspects of the organization. It provides a detailed overview of the various laws and regulations that apply to the organization. This section also discusses the various strategies implemented to ensure the organization is in full compliance with all applicable laws and regulations, ensuring the legal integrity of the organization.

7. The seventh part of the document discusses the environmental and social aspects of the organization. It provides a detailed overview of the various environmental and social issues that the organization is involved in. This section also discusses the various strategies implemented to address these issues, ensuring the organization is a responsible and sustainable entity.

8. The eighth part of the document discusses the future of the organization. It provides a detailed overview of the various goals and objectives that the organization has set for the future. This section also discusses the various strategies implemented to achieve these goals and objectives, ensuring the long-term success of the organization.

Mountin, W., Pennell, E. H., and O'Hara, Hazel. Relationship of a rural health program to the needs in the area. Public Health Reports 52(37):1264-84. September 10, 1937.

Discusses rural sanitary facilities, drinking water supply, and screening. Data collected in rural surveys by the U. S. Public Health Service.

Mustart, H. S. Need of more adequate public health programs in the several states American Journal of Public Health 32(9):961-964. September 1942.

The National Health Survey, 1935-1936.

During the fall and winter of 1935-1936 the United States Public Health Service, with the aid of grants from the Works Progress Administration, inquired into the state of the nation's health and underlying social and economic factors by means of a house-to-house canvass of over 700,000 households in urban communities in 18 states and 37,000 households in rural areas in 3 states.

A list of the publications reporting this survey can be found in the bibliography "The National Health Program and Medical care in the United States: Selected Recent References" by Ruth Fine and "Public Health Reports" for May 29, 1942. Both of these lists are noted in the BIBLIOGRAPHY section of this bibliography.

Our health, the wealth we keep and share. So. Dak. State Col. Agr. Ext. Leaflet 72, 6 p. 1943.

Reinhardt, James M., and Schroeder, Martin H. Physicians and hospitals in rural Nebraska. Medical Care 1(4): 332-343. October 1941.

"The limited availability of physicians, hospitals and public health services in large parts of Nebraska is forcibly brought out" in this study.

Sommers, H. J. Infant Mortality in rural and urban areas. Public Health Reports 57(40):1494-1501. October 2, 1942.

Discusses the relative number of infant deaths in rural and urban areas.

Taylor, Alva W. The deficit in medical services. Mountain Life and Work 18(1): 20-23. Spring 1942.

A picture of the medical deficit in the nation as well as in the southern highlands area.

U. S. Bureau of human nutrition and home economics. Family economics division. Wartime family living. Annual outlook issue: autumn 1943. 48 p. Washington, D. C., October 1943.

Prepared for the Twenty-First Annual Outlook Conference of the Department of Agriculture. All facts relate to the period prior to October 1943.

The section on Medical care for farm families covers the present situation Department of Agriculture group medical care programs, medical care under extension of the social security program, and post-war medical care. pp. 31-34.

1. The first part of the document discusses the importance of maintaining accurate records of all transactions and activities. It emphasizes the need for transparency and accountability in financial reporting.

2. The second part of the document outlines the various methods and techniques used to collect and analyze data. It includes a detailed description of the experimental procedures and the statistical analysis performed.

3. The third part of the document presents the results of the study. It includes a series of tables and graphs that illustrate the findings of the research. The data shows a clear trend of increasing activity over time.

4. The fourth part of the document discusses the implications of the findings. It suggests that the results have significant implications for the field of study and may lead to further research in this area.

5. The fifth part of the document concludes the study. It summarizes the main findings and provides a final statement on the importance of the research.

U. S. Congress. House. Select committee investigating national defense migration. National defense migration. Hearings...77th Cong. 1st and 2d sess. pursuant to H. Res. 113. Part 25 Washington Hearing, January 13, 14, 15, 1942. Testimony relating to the maintenance of civilian morale. Washington, D. C., U. S. Govt. print. off. 1942.

Exhibit 34 - Health of the American Farmer and Farm Worker. Report by Dr. R. C. Williams, Chief Medical officer, Farm Security Administration, U. S. Department of Agriculture, Washington, D. C.

The rural health situation in the United States with particular reference to FSA clients.

U. S. Dept. of agriculture. Interbureau committee on post-war programs. AGRICULTURE WHEN THE WAR ENDS. 57 pp. processed. (Washington) October 15, 1943.

A statement of the prevailing situation as to rural health and medical services that may be expected when the war ends. pp.47-50.

U. S. Dept. of agriculture. Northeast post-war planning committee. Northeast agricultural atlas. v.p., processed. Upper Darby, Pa., 1944.

A discussion of health service plans will be found in section G. There is a list of medical and hospitalization plans in the northeast, and several maps presenting, the medical care situation in that region graphically

U. S. Federal Security Agency. The health status of NYA youth. A nation-wide survey of youth on the out-of-school work programs of the National Youth Administration. 77 p. Washington, U. S. Govt. print. off., 1942.

Some comparisons are made between the health conditions of rural and urban youth. "The examining physicians in rural areas generally classified a larger proportion of youth as fit for any employment than did examiners in cities," p. 43.

Van Diest, Alice E. Welfare and health facilities in Colorado. 17 p. Colorado College Publication General Series no. 214. Colorado Springs, 1937.

Warburton, A. N. Wood, Helen, Crane, M. M. The work and welfare of children of agricultural laborers in Hidalgo County, Texas. 74 p. U. S. Children's Bureau Publication no. 298. Washington, D. C., U. S. Govt. print. off. 1943.

Information on the health of the children and conditions affecting their health, including medical and dental care.

Willson, E. A. Social organizations and agencies in North Dakota. 79 p. North Dakota, Agr. Exp. Sta. Bul. 221. August 1928.
Discussion of health agencies pp. 39-43.

Wilson, I. C. Sickness and medical care among a rural bituminous coal-mining population of Arkansas. 44p. Ark. Agr. Expt. Sta. Bul. 394. 1940

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[The page contains extremely faint, illegible text, likely bleed-through from the reverse side. The text is organized into several paragraphs, with some lines appearing as bold or indented. Due to the low contrast and noise, no specific words or phrases can be transcribed.]

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U. S. Public health service. Results of serological blood tests for syphilis on selective service registrants. Based on the second million reports received during the period April 16, 1941, to August 31, 1941 for registrants examined in accordance with provisions of the Selective training and service act of 1940. 428 p., processed. Washington, D. C. October 1942.

Information given for states and the United States for rural and urban residents.

The results of the first million reports was published in 1940.

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Gives figures for availability for military service by race, urban-rural residence and place of birth. "The rate of acceptance for general military service was 61.9 percent for registrants from rural areas compared to 57.6 percent for registrants from urban areas."

U. S. Social security board. Medical care and costs in relation to family income A statistical source book including selected data on characteristics of illness by Helen Hollingsworth and M. C. Klem. 219p., processed. Bureau memorandum no. 51. Washington, D. C., March 1943.

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A Department of the National Education Association.

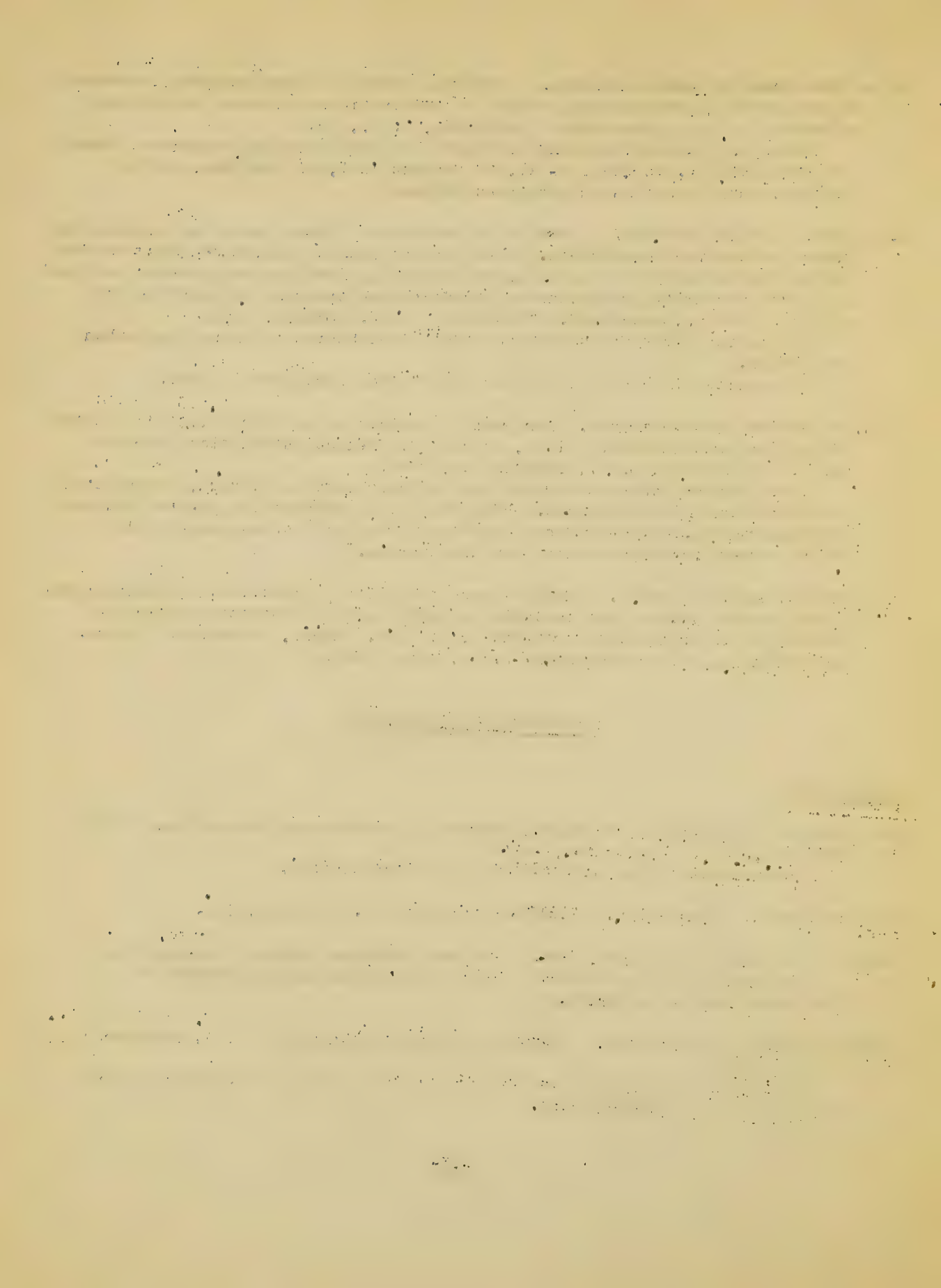
American Dental Association. 212 East Superior St. Chicago, Ill.

American Hospital Association, Inc. 18 East Division Street, Chicago, Ill.

Concerned with the efficient institution, care and management of hospitals and dispensaries.

American Medical Association. Bureau of Medical Economics 535 N. Dearborn St., Chicago, Ill.

The Bureau investigates and reports on the social and economic aspects of medicine and medical care.



American Public Health Association 1790 Broadway, New York City.

Promotes public health by encouraging and conducting surveys and studies concerning public health administration, research, education and standardization.

American School Health Association, Kent, Ohio.

To promote comprehensive and constructive school health programs, including the teaching of health, health services, and healthful school living.

The Bureau of Cooperative Medicine. See Medical Administration Service.

Committee on Research in Medical Economics. 1790 Broadway, New York.

To conduct studies of medical services and particularly of their economic and social aspects for the purpose of promoting better and more accessible medical care.

Commonwealth Fund. 41 East 57th Street, New York.

Maintains a research and statistical department known as the Division of Health Studies; the Division of Public Health which is concerned with the development of rural health works in selected states; and the Division of Rural Hospitals, concerned with the erection of hospitals serving rural communities, and in the establishment of first class standards in such hospitals.

Edward A. Filene Good Will Fund 31 Milk St. Boston, Mass.

Distribute publications on health

Foundation for Positive Health 1790 Broadway, New York.

To create a desire for positive health and to further ways and means for obtaining and maintaining it by lecture courses and distribution of literature.

Group Health Federation of America 1790 Broadway, New York.

Promotes health plans providing good medical care at moderate costs, to establish high standards of personal medical care and to unify activities of member groups through exchange of experience and information.

Medical Administration Service Inc., 1790 Broadway, New York.

"...a non-profit organization serving as a national clearing house for the collection and dissemination of experiences in the field of medical care and medical economics."

Took over the work of the Bureau of Cooperative Medicine at the end of 1940.

Milbank Memorial Fund 40 Wall Street, New York

Assists official and private agencies and institutions in the field of public health and medicine, education, social welfare, and research.

National Health Council 1790 Broadway, New York, N. Y.

The Council coordinates the activities of its 13 member organizations and carries on joint projects in the field of public health.

National Safety Council, 20 North Wacker Drive. Chicago, Ill.

To prevent accidents at home, at work, on the farm, on the highways, and in other public places, and to prevent occupational disease.

Directories

American hospital association. Hospital service plan commission. Directory of Blue Cross contract provisions. 9 charts, processed. November 1, 1943.

List of plans, subscription rates, hospital benefits, type of accommodations, duration of service emergency allowances.

American Hospital Association. Directory of non-profit hospital service plans. 157 p. Chicago, The Association, 1941.

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American Medical Association. Hospital service in the United States. Journal March 27, 1943.

This is also issued as a reprint by the Association. Gives statistics for states on number of hospitals, beds, births, admissions etc.

Directory of full-time local health officers, 1942. Public Health Report 57(10): 328-360. March 6, 1942.

Gives local health unit, name of health officer, post office address, official title.

Periodicals

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The American Journal of Public Health and the Nation's Health. Monthly. American Public Health Association, New York, N. Y.

American Medical Association. Journal. Weekly. Chicago, Ill.

Hygeia, The Health Magazine. Monthly. American Medical Association, Chicago

The Journal of Health and Physical Education. Monthly. Ann Arbor, Michigan

Medical care; economic and social aspects of health service. Quarterly. Published for the Committee on Research in Medical Economics, Inc. by the William and Wilkins Co., Baltimore, Md.

Current developments in the fields of medical care and health services in the United States and abroad. Frequently contains articles on rural health.

1. The first part of the document discusses the importance of maintaining accurate records of all transactions. It emphasizes that proper record-keeping is essential for the transparency and accountability of the organization. This section also outlines the various methods used to collect and analyze data, ensuring that the information is reliable and up-to-date.

2. The second part of the document focuses on the financial aspects of the organization. It provides a detailed overview of the budget, including the projected income and expenses for the upcoming year. This section also discusses the various financial risks and how they are being managed to ensure the organization's financial stability.

3. The third part of the document addresses the operational challenges faced by the organization. It identifies the key areas where improvements are needed and outlines the strategies being implemented to address these challenges. This section also discusses the role of the various departments in the organization and how they are working together to achieve the organization's goals.

4. The fourth part of the document discusses the human resources aspect of the organization. It provides an overview of the current workforce and the various initiatives being implemented to attract and retain top talent. This section also discusses the importance of employee development and how the organization is investing in training and development programs to ensure that its workforce is equipped with the skills and knowledge needed to succeed in the future.

5. The fifth part of the document discusses the environmental and social aspects of the organization. It provides an overview of the organization's environmental and social impact and outlines the strategies being implemented to reduce its carbon footprint and improve its social performance. This section also discusses the importance of stakeholder engagement and how the organization is working to build strong relationships with its various stakeholders.

6. The sixth part of the document discusses the future of the organization. It provides an overview of the organization's vision and mission and outlines the strategies being implemented to achieve these goals. This section also discusses the importance of innovation and how the organization is investing in research and development to ensure that it remains at the forefront of its industry.

7. The seventh part of the document discusses the conclusion of the document. It summarizes the key findings of the document and outlines the next steps for the organization. This section also discusses the importance of ongoing monitoring and evaluation and how the organization is working to ensure that it is staying on track with its goals and objectives.

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